6 Key Areas

for Quality Behavioral Health Services

A document created by the

Youth And Family Work Group

Members from GEAR Parent Network, Youth MOVE Maine, Maine Parent Federation and your communities.



INTEGRATED

"Families and youth experience care that has smooth transitions in and out of services, which addresses the culture, strengths and needs of the whole person and family."

What it looks like in an INDIVIDUAL	 Experience progress toward goals across multiple aspects of life (work, health, mental health, etc) Support the supports (parents and guardians) My culture is expressed in my plan Plan is appropriate to and respects my personal/family values, beliefs Experience smooth transitions in and out of services
What it looks like in an AGENCY	 Plans include multiple aspects of life to address challenges Individualized plan Involved/community connections Connected with other community resources (services and natural supports) Have knowledge of community resources Flexible to accommodate individual needs Permission to share (open communication)—BUT "nothing about us without us"
What it looks like in POLICY	 Systems (Juvenile justice, education, child welfare, mental health) talk to each other and support each other Consistency among systems/services Collaborative Capacity building Flexible to accommodate needs (funding structures allow for collaboration) Contracts bring agencies together

Effective

"Families and youth are able to achieve goals as a result of services."

What it looks like in an	 Progressing and achieving goals
INDIVIDUAL	 Reduce services needed to achieve goals (more focus on
	natural supports)
	 Access (and informed about) to natural supports and
	resources (people and non-people)
	 Alternative treatments available that work (i.e. acupuncture, meditation)
	 Peer support that reduces need for clinical services
	 Reasonable amount of time allowed to achieve goals
What it looks like in an	Specific to goals
AGENCY	 Research supported/based treatment
	Good reputation
	 Respond to feedback from clients (make better)
	 Participants achieve goals
	 Plans contain reasonable and achievable goals – short and long term
	Viable discharge plan at each discharge
	 Plans include 'in the future' (transition plan)
	Key roles in plans understand their roles/communication
What it looks like in POLICY	Continuous Quality Improvement
	 Training and professional development
	 Enough time and money to provide effective services
	 Training and funding for effective services with peer
	components

Youth and Family Driven

"Recognizing the capacity of youth and families to foster shared growth and leadership and for youth to take on more and more leadership of their own lives as they approach adulthood."

What it looks like in an	Youth and Family members each feel heard
INDIVIDUAL	 Mutual, respectful communication is fostered
	Mutual agreements are honored
	 Know what services are available.
	 Got to say what they wanted in their plan
	Roles in plan are clear
	 Got what expected/asked for
	 Are informed & understand (informed consent/assent family members AND youth over 14.)
	Developmental growth in leadership
	 Services work to create opportunities for youth and families
	to validate unique perspectives and bridge
What it looks like in an	 Asks feedback from youth and family
AGENCY	Responds to feedback
	 Collaboration with youth and families finding solutions
	Choices, not imposed
	 Offer variety- including non traditional treatments
	Offer information in an understandable way
What it looks like in POLICY	 Policies respond to youth and family feedback.
	 Contracts reflect youth and family feedback
	 Youth and families have clear, authentic opportunities to provide feedback
	Outreach and education to youth and families and providers
	about resources, models of treatment.

STRENGTHS-FOCUSED

"Families and youth experience services where they identify, build, and utilize their unique strengths."

What it looks like in an INDIVIDUAL	Youth and families feel their strengths have been
INDIVIDUAL	acknowledged
	Strengths address goals
	Discover/can name strengths
What it looks like in an	 Not make negative assumptions/seek the positive
AGENCY	Do specialized activities to identify strengths (help youth and
	family learn the skill of id'ing strengths)
	Achievable goals- celebrate achievements
	Listen and learn from youth and families
	Strengths are in plan
	Be explicit on how each strength is addressing each goal
	(asset bank)
	 Learn and use strengths to address goals
	Collaborate with youth and family in agency/policy as key
	stakeholders
What it looks like in POLICY	Services aren't stigmatized- avoid negative labels when
	possible
	At policy level- model strengths focused
	Expect in contracts and cgi (chart reviews)
	Collaborate with youth and families as experts of their own
	experience in policy development.
	About person, not funding- allow treatment to be funded
	without harmful labels (sense of too much labeling/creates
	stigma)
	Not excessive diagnosing and testing
	Alternative and preventative care funded
	Peer focused (non diagnostic) services
	- i cei iocuseu (non diagnostic) services

ACCESSIBLE

"Services are available to meet diverse needs of youth and families across the state"

What it looks like in an	 Experiencing the service that they need
INDIVIDUAL	Affordable
	 Not cut from services before goals are met
	Office hours vary
	 Know and are hopeful that they will find/have access to help
	Can get there (transportation/location)
What it looks like in an	Low/no wait list
AGENCY	Making person centered
	Reasonable supports and accommodations made for people
	living with a disability
	 Not expect youth and families to fit into what's available—
	make things available to unique needs and strengths
	 Preference and choice available in all areas
	 Direct/refer if need can't be met at agency
	 Culturally relevant and language access in each community
	Services offered to meet community needs
What it looks like in POLICY	 Contracts mandate and funding supports low wait list,
	language access
	Cultural training
	 Increase availability of billable peers to meet interim needs
	(if wait list, why not have peers as a first point of contact?)
	 Training and funding for evidence based practices across
	state (rural too)
	Resources for transportation

PHYSICALLY AND EMOTIONALLY SAFE

"youth and families experience a respectful system that does not harm and is responsive to each person's unique needs to ensure physical and emotional wellbeing"

What it looks like in an	Are not physically harmed
INDIVIDUAL	 Are supported in safety efforts (meeting basic needs, harm reduction)
	Feel that they trust their workers
	Punishments cannot include taking away family/support
	Have options if uncomfortable with a certain situation
	Have opportunity to take a break/not have to comment
	Know (shown) who to go to if something goes wrong
	Understand confidentiality/rules
	Know about their provider/service- evidence presented in an
	understandable way
	 Boundaries negotiated (not black and white)
	Know where exits are
	 Safe space available—comfortable space available
	 Fully understand risks and benefits of program
	Has crisis plan that works
What it looks like in an AGENCY	 Trauma informed (understand impact of trauma on behavior)
	 Orient and share information with youth and families
	Listen and understand
	Has crisis plan that works
	 Accept feedback without repercussion to youth & family
What it looks like in POLICY	 Trauma informed in contract language and support training